



**Public Bathing Facility Program**  
**Biology Section**  
29 HAZEN DRIVE, PO BOX 95  
CONCORD, NH 03302-0095  
PHONE: 603-271-7108

**SPA**  
**Application**

Pursuant to RSA 485-A:26, any person requesting public bathing facility construction approval shall submit the following information and a \$100 fee for each facility. **NOTE: No installation or reconstruction may be initiated until DES approval has been granted. No changes to any structure and/or circulation and disinfection system component may be made without prior approval from DES. Also, a pre-opening inspection by DES is required prior to public use.**

Name of establishment where facility is located:	Location of facility (Town / City):
Facility street address:	Mailing address (if different):
Facility phone number:	Is facility located: Outdoors <input type="checkbox"/> or Indoors <input type="checkbox"/>
Facility Owner / Contact (Name, mailing address, and phone number):	
Facility Designer / Installer (Name, mailing address and phone number):	

**Attach plans showing the following information:**

1. Simple layout of buildings, spa, rest rooms, showers, and location of water supply.
2. Scale drawing of the spa showing dimensions; skimmer and inlet locations; spacing of gutter or deck drains; size, location and material of piping, fill-spout and main drains / suction outlets.
3. Longitudinal section of entire spa and cross-section showing depths & slopes.
4. Detailed schematic of circulation and disinfection piping.
5. Specifications of circulation system components.

**Information for spa structure:**

Capacity in gallons:		Material of construction:
Maximum water depth (ft):		Depth of seat or bench (ft):
Slope of bottom (ft/ft):		Shape:
Perimeter of spa(ft):	Surface area of spa (sq ft):	Length & width <input type="checkbox"/> or diameter <input type="checkbox"/> (ft):
<b>X</b>		



**Information for spa circulation system:**

Number of inlets:	Gutter system: Yes <input type="checkbox"/> No <input type="checkbox"/>
Number of skimmers:	2" diameter skimmer equalizer pipe: Yes <input type="checkbox"/> No <input type="checkbox"/>
Hair Strainer: Yes <input type="checkbox"/> No <input type="checkbox"/>	Flow meter manufacturer: Flow meter range:
Disinfection Type & Method: Chlorination: <input type="checkbox"/> Bromination: <input type="checkbox"/> Positive displacement: <input type="checkbox"/> Erosion: <input type="checkbox"/>	
Disinfection unit manufacturer (submit specifications): Model: Capacity: (include units)	
Pump recirculation rate (gpm) (submit pump specifications):	
Turnover time (in minutes) [spa capacity (gal)/recirculation rate(GPM)]:	
Type of Filter: High Rate Rapid Sand: <input type="checkbox"/> Low Rate Rapid Sand: <input type="checkbox"/> Cartridge Type: <input type="checkbox"/> Vacuum Diatomaceous Earth: <input type="checkbox"/> Pressure Diatomaceous Earth: <input type="checkbox"/>	
Filter manufacturer (submit specifications): Model: Filter area (sq ft): Filter flow rate (gpm/sq ft):	

**Information for spa safety and management:**

Depth markings on the spa deck: Yes <input type="checkbox"/> No <input type="checkbox"/> Vertical spa wall at or above water line: Yes <input type="checkbox"/> No <input type="checkbox"/>	Anti-Entrapment Devices Installed: Yes <input type="checkbox"/> No <input type="checkbox"/> Type: SVRS <input type="checkbox"/> Other <input type="checkbox"/> Manufacturer: Model: (submit specifications)
Security fencing provided: Yes <input type="checkbox"/> No <input type="checkbox"/>	Number of Showers available for immediate use:
Number of Toilets available for immediate use:	
Circulation and disinfection system component operating and maintenance instructions are provided for spa owner/operator: Yes <input type="checkbox"/> No <input type="checkbox"/>	
Water quality testing kit with fresh dated reagents capable of testing for free and total chlorine or bromine, pH, temperature, etc. are provided: Yes <input type="checkbox"/> No <input type="checkbox"/>	

**Information for water supply and backwash disposal:**

Source of facility make-up water: Municipal: <input type="checkbox"/> Well: <input type="checkbox"/> Surface Water: <input type="checkbox"/>
Has the source water been analyzed?
Make-up water piping is: Hard piped with a six inch air gap: <input type="checkbox"/> Hose filled with a vacuum breaker backflow preventer: <input type="checkbox"/>
If filter is to be backwashed, where is disposal site for backwash?